## File with: Iowa Ethics and Campaign

Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

# DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees AMPAIGN DISCLOSURE BU statements and reports filed electronically and effective January 1, 2012, all electronically.

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Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically. Porce Come

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COMMITTEE MAN	AE (AA - 41	RESET	[a2](i)]}	
- Andrews - Control of the Control o	ME (Must be same as on Statement of O			
(1)Statewide/Legisla (4)County Central C	te by # type of committee you are reporting for ative/Judge Standing for Retention Candidate ommittee (5) County Candidate (6) City Cale (8) County PAC (9) City PAC (10) Schole	or; 2 )State PAC (3 )State Party	FORM DR-2 (Rev. 12/2009	/
11) Local Ballot Issue	e / / / / / / / / / / / / / / / / / / /	of Board or Other Political Subdivision P	PAC   For Office Use	14244
CANDIDATE COM Candidate Name	MITTEES ONLY:	Political Party (if applicable	Logged in	
Office Sought	Courcic 3el WA	District (if Senate or House	) Audited	
W.6.	ct to possible civil and criminal penalties. Penand the chairperson, for any other type of RSON FILING REPORT	Pursuant to lowa Code sections 68B.3 f committee, is the individual responsion of the section of	tole for filing timely and acc	candidate, for a urate reports.
PERSONAL PROPERTY AND DESCRIPTION OF THE PERSON OF THE PER	AGON FILING REPORT	TELEPHONE	DATE	SIGNED
I AM FILING A	31/2-7 17			
	(report date)	REPORT FOR (1) ELECTIO	N /(2)NON-ELECTION Y	EAR.
CHECK IF AMEND	DMENT TO REPORT DATED		Local Committees, enter D	
	al (termination) report and attach Notice ontinue to file reports until a DR-3 is file of the second	d.)	County & Local Committee which Election is held	es, enter County in
	ne beginning of the reporting period. (To This amount MUST be the same as the porting period or must be zero if this is fi		. 21	
ADD TOTAL	MUNEY TAKEN IN THIS PERIOD			10.00
Schedule A:	Cash Contributions total (Attach Sched	ule A) (*also see in-kind below)		
ochedule F.	Loans Received total (Attach Schedule	F)		
Schedule H:	Total Sales of Campaign Property (Atta	ich Schedule H)	***************************************	
(Sch	nedule H applies to Candidates' Comm	nittees Only)		
		SUB-TOTAL	\$	
Schedule 8:	TOTAL MONEY SPENT THIS PERIOD			
Schedule 5.	Expenditures total (Attach Schedule B)	(**also see debts and loans below).		
ochedule F.	Loan Repayments total (Attach Schedul	e F)		
ASH ON HAND at the	e end of this reporting period (if final repo	ort balance must be zero)	S	
UNPAID BILLS (From	n Schedule D - Attach Schedule D)			
I Daily in a court Kind I	IONS (From Schedule E - Attach Sched	ule E)		100
TO THINDING LOA	NS (From Schedule F - Attach Schedule	∍ F)	5	60.5
DREAM	(Schedule G Attached?)		FOR COMPANY	0
ANDIDATE COMMITT	TEES ONLY:		YES	NO
LUE OF CAMPAIGN	PROPERTY (From Schedule H - Attac	h Schedule H)		
ATE COMMITTEES:	Submit a reconciled campaign account	bank statement in January of	\$	

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A COUNTY		FOFT	73 19
25000000		100	tion is
MEDICAL SERVICE	化化 知的 化水	DOM: MINUS	STATISTICS.

#### EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

		same as on Statement of Organization)		
FROS	TFOR C.	suncic leason 3 da	WARA	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	Dickey Harrist		
	CK#	Day Julino	FLYER	\$60.00
10/01/13	ID#	2	Pusiel	\$780.00
	CK#	Dickey Printing	Posice	780.00
	ID#	1		
10/15/13	CK#	Richard Felland	There	20.00
	ID#	1 1. 1 1 Marie W.	17700	
	CK#			20
	ID#			2013 OC
	CK#			AMPAÏGN D 2013 OCT 3
	ID#		4	86
	CK#			PN L
	ID#			4: 21
	CK#			<b>F</b> 00
	ID#			
	CK#			
			SUB-TOTAL	\$ 52/200
			TOTAL (if last page of this schedule)	\$ 200.0

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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(for Schedule B)

# A ETHICS AND Reset Form

### EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIPE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
		uncia lerson 3 la	( Luan A	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	Dixey Printing	Ftyer	\$ 60.00
10/01/13	ID# CK#	Dickey PRIVITAGE	posice	\$ \$60.00
	ID#	A		
	CK#	/		
	CK#			
	ID# CK#			
	ID#			
	CK#			
	ID# CK#			
	ID#			
Designation of the state of the			SUB-TOTAL TOTAL (if last page of this schedule)	1 70-00

THIS BOX APPLIES	TO	CANDIDATES'	COMMIT	TEES	ONLY:
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A 402(3)(i).)

Page	 of	_/

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM						SCHEDULE	INLVINID
			as on Statement of Organ				IN-KIND CONTRIBUTIONS
Flos		FOL	Courcet	Taison 32	Reset Form	CHECK AMENDI	THIS BOX IF NG FORM
DATE RECEIVED (MM/DD/YR)			D ADDRESS TRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
10/15/13	W	LL'AM	b. Flori	Seff	Morey	60.00	
10/4/13	Ric	GARD	FELLANN	Horic	Mary	20.00	
	The state of the s						
							N PARTE
			The first same and the same and				31 P
							### B
						The second secon	
					SUB-TOTAL  TOTAL (if last page of this schedule)	\$ 80 cc	
committee. Re by marriage).	lationship (See Pag	must be shown e 2 of forms page	to the third degree of co	onsanguinity (blood relat	in kind contribution to the ives) and affinity (relative andidate, but there is no	e Page(	of for Schedule E)